#### IPO and EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS ₹ <u>=</u> = PRELIMINARY INFORMATION -- ANSWER EACH OF Status Report Trusts--Filer Type Exemptions-PO Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth If yes, complete and attach Schedule V. (more than \$10,000) during the reporting period? Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Did you, your spouse, or a dependent child have any reportable liability If yes, complete and attach Schedule III. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? more than \$1,000 at the end of the period? If yes, complete and attach Schedule II. If yes, complete and attach Schedule I. if yes, complete and attach Schedule IV. < < House of Representatives Member of the U.S. Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child Annual (May 15) disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be Did you purchase any shares that were allocated as a part of an Initial Public Offering? because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics Lois Capps (Full Name) Amendment State: District: 24 S Ύes ĕs Yes Ύes Yes < < < < THESE QUESTIONS Termination S <u>Z</u> 증 몽 <u>8</u> < **Employee** Officer Or × VIII. current calendar year? **≦** ≤ Did you, your spouse, or a dependent child receive any reportable travel or relimbursements for travel in the reporting period (worth more than \$350 Each question in this part must be answered and the appropriate Did you hold any reportable positions on or before the date of filing in the the reporting period (i.e., aggregating more than \$350 and not otherwise schedule attached for each "Yes" response. If yes, complete and attach Schedule IX Did you have any reportable agreement or arrangement with an outside If yes, complete and attach Schedule VIII. If yes, complete and attach Schedule VI. from one source) If yes, complete and attach Schedule VII. Did you, your spouse, or a dependent child receive any reportable gift in Termination Date **Employing Office** (Daytime Telephone) 2013 HAY 15 AM 11: 03 MC A \$200 penalty shall more than 30 days anyone who files be assessed against (Office Use Only) Yes Yes Yes □ Yes Yes Yes és < 8 (S 8 **⟨** ₹ **\** 8 ĕ ĕ Š < < <

CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT

UNITED STATES HOUSE OF REPRESENTATIVES

For use by Members, officers, and employees

FEGISLATIVE RESOURCE CENTS

# **SCHEDULE I - EARNED INCOME**

Name Lois Capps

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Туре	Amount
State Teachers Retirement System	Pension	\$20,303
University of CA Retirement System	Pension	\$48,465
Pershing LLC	IRA Distribution	\$2,025

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME	ME Name Lois Capps	SC		Page 3 of 7
ВГОСК А	BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearmed" income during the year.  Provide complete names of stocks and mutual funds (do not use ticker symbols.)  For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.  For rental or other real property, and a city and state.  For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.  Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retrement program, including the Thrift Savings Plan.  If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left.  For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	Year-End Value of Asset Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."  * This column is for assets held solely by your spouse or dependent child.	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital plans, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	Amount of Income For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.  * This column is for income generated by assets held solely by your spouse or dependent child.	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
Congressional Federal Credit Union	\$1,001 - \$15,000	None	NONE	
Harpers Collins	Indefinite	Royalties	\$201 - \$1,000	
ING	\$1 - \$1,000	INTEREST	\$1 - \$200	
IRA - Artio Intl Equity Fund II	None	TAX-DEFERRED	NONE	v
IRA - Capitol World Bond Fund	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
IRA - Dodge & Cox Income Fund	\$1,001 - \$15,000	TAX-DEFERRED	NONE	-

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Name Lois Capps

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Studio Apartment - Santa Barbara, CA	Santa Barbara Bank & Trust/Union Bank	Rabobank	MET Life (stock)	IRA - T Rowe Price Capital Appreciation	IRA - Powershares ETF Trust Wilder Hill Clean Energy	IRA - First Eagle Overseas Fund	IRA - Financial Network Money Market	IRA - Fidelity Advisor New Insights	
\$1,000,001 - \$5,000,000	\$1 - \$1,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$15,001 - \$50,000	\$1 - \$1,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	
RENT	INTEREST	INTEREST	DIVIDENDS	TAX-DEFERRED	TAX-DEFERRED	TAX-DEFERRED	TAX-DEFERRED	TAX-DEFERRED	
\$5,001 - \$15,000	\$1 - \$200	\$1 - \$200	\$201 - \$1,000	NONE	NONE	NONE	NONE	NONE	
				S(part)		T		S(part)	

# **SCHEDULE IV - TRANSACTIONS**

Name Lois Capps

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is sold, please so indicate (i.e., "partial sale"). See example below. Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income, if only a portion of an asset investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions

Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III. \* This column is for assets solely held by your spouse or dependent child.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	IRA - Artio Intl Equity Fund II	S	No	10-26-2012	\$1,001 - \$15,000
	IRA - Fidelity Advisor New Insights	S(part)	N <sub>o</sub>	1-12-12 9-17-12	\$1,001 - \$15,000
	IRA - First Eagle Overseas Fund	<b>ט</b>	N/A	10-26-12	\$1,001 - \$15,000
	IRA - T Rowe Price Capital Appreciation	S(part)	N <sub>o</sub>	1-12-12 7-13-12	\$1,001 - \$15,000

#### **SCHEDULE V - LIABILITIES**

Name Lois Capps

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: for liabilities held solely by your spouse or dependent child. your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. \*This column is Any mortgage on your personal residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or

Sa	SP, DC,	
Santa Barbara Bank & Trust	Creditor	
March 2011	Date Liability Incurred	
Mortgage on home and rental apt. in Santa Barbara	Type of Liability	
\$1,000,001 - \$5,000,000	Amount of Liability	

### **SCHEDULE IX - AGREEMENTS**

Name Lois Capps

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Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

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Date	Parties To	Terms of Agreement
1996	Myself and State Teachers Retirement System	pension for service